+	Substitute for Form PTO-875										10/649637		
	CLAIMS AS FILED - PART I								SHALL ENITES		нто	ER TIMN	
<i>\</i>		(Column 1)		(Column 2)		SMALL ENTITY		ار Où	SMAL	L ENTITY			
-	FOR BASIC FEE	MUNBER FRED . IN		UMBER EXTRA		RATE	FEE	4	RATE	FEC			
	(37 CFR 1.16(a)) TOTAL CLAMAS				<del></del>		_		s	OR		s	
10	37 CFR 1.16(c)	minus 20 = *				╛	x s=		OR	X 5 =			
G	INDEPENDENT CLAIMS (37 CFR 1.16(b))			mlnu			x s=		OR	X 5 =			
A	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))							+5 =		OR	+ 5 =		
.	* If the difference in column 1 is loss than zero, enter "0" in column 2.							TOTAL		OR	<u> </u>		
	~ as				D - PART II	-		, , , , ,	<u> </u>	_, <sub>O</sub> .,	JATOT		
10	cine	Zochum	) AS A	WENDE	O-PARTI								
18	260		ımn 1)		(Column :	2) (Column 3	)	SMALL	ENTITY	OR		R THAN ENTITY	
\ \ \		REM	AIMS AINING		HIGHEST NUMBER		-	RATE	ADDI-		RATE	-IQQA	
EN	·		TER IDMENT		PREVIOUS! PAID FOR				TIONAL			TIONAL	
Š	Total (37 CFR 1.16(c)	<u>,   :3</u>	<u>S</u>	Minus	1 42	.   =		x s=		OR	x \$=		
AMENDMENT	Independent (37 CFR 1.15(b)	1.5	5	Minus	7	e		x \$=		OŘ	x \$=		
ব	FIRST PRESE	ENTATION OF	MULTIPL	E DEPEN	DENT CLAIM (37	CFR 1.16(d))	7	+\$ =		OR	+5 =		
							_, ,	TOTAL ADD'L FEE		OR	TOTAL		
		(Colun	na 1)		(Column 2	(Column 3)		,000,000	L	] 0	ADD'L FEE	L	
۵		CLA	MS		HIGHEST		7 [			1		<del></del>	
뉟		REMA	ER		NUMBER PREVIOUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
٣ŀ	Total (37 CFR 1.16(cl)	AMEND	MENI	Minus	PAID FOR	=	1 }		FEE			FEE	
맑	Independent	<del> </del>		Minus	***	<del> </del>	┨┠	X \$=		OR	x s=		
Şŀ	(37 CFR 1.16(b))	<u> </u>				<u> </u>	┨┠	X \$=		<b>o</b> R	x \$=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							+\$=		OR	+ 5=		
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
		(Column	1)		(Column 2)	(Column 3)		•			•		
25 2		CLAIN REMAIN AFTEI AMENDM	ING R		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	•	RATE	ADDI- TIONAL FEE	
G	Total F CFR 1.16(c))	•	'	Minus	40	E .	١,	(\$ =		O.P.	x \$=		
(c	dependent 7 CFR 1.16(b))	•	-	Vinus	•••	=				OR			
F	RST PRESENTA	ATION OF MI	LTIPLE D	EPENDEN	IT CLAIM (37 CF	R 1 16/40		<u> </u>		OR			
<del></del>					, 401m , (31 Cr	1. 1.10(u//		OTAL =		OR	+ \$=		
								DOLFEE	1	OR	ADD'L FEE		

"If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

"If the "Highest Number Previously Pald For" IN THIS SPACE is less than 20, enter "20".

"If the "Highest Number Previously Pald For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Pald For" (Total or independent) is the highest number found in the appropriate box in column 1.

collection of information is consisted by 27 CEP 1.16. The information is consisted to obtain or retain a barreft by the public which This offiction of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.